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Health, Education and Human Services Division

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November 2, 1995

The Honorable Lane Evans
House of Representatives

The Honorable Luis Gutierrez
House of Representatives

On September 28, 1994, the Subcommittee on Oversight and Investigations of the House Committee on Veterans' Affairs held a hearing on issues facing Hispanic veterans. The witnesses at the hearing provided information on Hispanic veterans' underutilization of veteran benefits and on obstacles to greater utilization. This letter responds to your request, as a follow-up to that hearing, that we provide additional insight on how the Department of Veterans Affairs (VA) addresses the unique needs of Hispanic veterans. Specifically, you asked us to (1) identify what initiatives VA has undertaken to respond to Hispanic veterans' cultural and language needs, including helping to obtain services from other federal agencies; (2) compare these initiatives with activities of other federal agencies, such as the Internal Revenue Service (IRS), Social Security Administration (SSA), Department of Labor's (DOL) Veterans' Employment and Training Service (VETS) program, and the Public Health Service's (PHS) Office of Minority Health (OMH); and (3) identify the data that VA collects to evaluate its delivery of VA benefits and services to Hispanic veterans.

To respond to the questions you raised, we discussed these issues with numerous VA headquarters officials in the Veterans Benefits Administration (VBA), Veterans Health Administration (VHA), National Cemetery System (NCS), Center for Minority Veterans, National Center for Veteran Analysis and Statistics, and Office of Equal Opportunity (see enc. 1 for a list of the offices that we contacted). As requested, for comparison purposes, we also obtained information from headquarters officials at IRS, SSA, DOL, and PHS about the services they provide to their limited-English-speaking populations. This work was performed from June through September 1995 in accordance with generally accepted government auditing standards.

GAO/HEHS-96-25R Hispanic Veterans

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In summary, VA has several agencywide and local initiatives under way to address Hispanic veterans' cultural, language, and non-VA service needs. These initiatives are similar to those provided by other federal agencies that serve a significant number of customers whose principal language is not English. However, it could be difficult for VA to assess the success of its initiatives, because VA does not collect data that would allow it to evaluate its delivery of benefits and services to Hispanic veterans. Thus, VA would need to conduct a special data collection effort if it wishes to assess Hispanic veterans utilization of program benefits or the success of outreach efforts. Currently, VA's Center for Minority Veterans is exploring specific data needs and approaches for collecting and assessing data relative to minority veterans. The center was established under the Veterans' Benefits Improvement Act of 1994 (38 U.S.C. 317) to promote the minorities' use of veterans' benefits, services, and programs.

BACKGROUND

VA has the responsibility of providing benefits and services (medical and nonmedical) to approximately 27 million ex-service members. VA carries out its responsibilities through three major components--VHA, VBA, and NCS--as well as regional and local facilities in each state, the Commonwealth of Puerto Rico, and the Republic of the Philippines. VHA provides ambulatory, acute, long-term, and respite care to veterans. These health care services are dispensed through a national system of medical centers, outpatient clinics, nursing homes, domiciliaries, and community-based programs. VBA manages nonmedical benefits and services through a network of 58 regional offices. Major benefits are disability compensation, pensions, educational assistance, home loans, burial, and rehabilitation assistance. NCS manages 114 national cemeteries and provides headstones and burial markers. The Under Secretaries for VHA and VBA and the Director of NCS are responsible to the Secretary of Veterans Affairs for the management of all activities and operations.

VA has long known that not all veterans use the benefits to which they are entitled. Moreover, some groups of veterans, specifically minority groups, have unique circumstances and special needs. Based on recent census data, minority and female veterans constitute 4.8 million of the 27.2 million living veterans, approximately 17 percent of the veteran population. Hispanic veterans, the second-largest minority group, constitute 925,000, 3.4 percent, of this population.

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The Secretary has pledged to make VA responsive to the concerns of each of the distinct groups in the veteran population. To achieve this goal, VA has started to revise its operations to meet the changing composition of its veterans.

VA is not alone in its efforts to ensure that all customers have access to benefits and services to which they are entitled. Federal agencies such as IRS, DOL, the Department of Health and Human Services' PHS, and SSA also serve their customers through a nationwide system. Some of these customers need help in communicating with agency staff due to limited-English skills.¹ IRS is responsible for collecting tax revenue. DOL's VETS helps veterans secure employment and the rights and benefits associated with such employment. PHS promotes the protection of the nation's physical and mental health. PHS' OMH provides departmentwide leadership by establishing, coordinating, and advocating policies, programs, and activities to improve the health of minority populations. OMH conducts information and education, policy, and demonstration projects to address key health issues affecting minority populations. SSA manages a national program of contributory social insurance whereby employees, employers, and the self-employed pay contributions that are pooled in special trust funds. When earnings stop or are reduced because the worker retires, dies, or becomes disabled, monthly cash benefits are paid to partially replace some of the earnings the family has lost. SSA also administers the Supplemental Security Income (SSI) program, a needs-based program for the aged, blind, and disabled funded through general revenues.

VA INITIATIVES AND ACTIVITIES

VA has several initiatives and activities that address the needs of Hispanic veterans. Some, such as the Center for Minority Veterans, a bilingual publication, and cultural awareness training, are coordinated at the department or headquarters level. However, most initiatives--such as developing bilingual publications; providing interpreter

¹A recently published GAO report showed that 48 federal departments and agencies publish foreign language documents. Between 1990 and 1994, IRS, DOL, Health and Human Services, and SSA issued 98, 37 percent, of the 265 published documents. See Federal Foreign Language Documents (GAO/GGD-95-243R, Sept. 20, 1995.)

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assistance; hiring bilingual staff; and coordinating with other federal, state, and local agencies to obtain non-VA services for veterans--are undertaken at the discretion of local VA facilities.

Agencywide Initiatives and Activities

Center for Minority Veterans

The Center for Minority Veterans may help address the needs of Hispanic veterans. In 1994, the Veterans' Benefits Improvement Act directed VA to establish the center to promote the use of veterans' benefits, services, and programs by minorities. The center's efforts focus specifically on five minority groups--African Americans, Asian Americans, Hispanic Americans, Native Americans (Indians, Alaskans, and Hawaiians), and Pacific Island Americans. Its mandate is to (1) promote the use of existing programs, benefits, and services by minority veterans and (2) propose new programs, benefits, and services to meet the specific needs of minority veterans. (See enc. 2 for the 10 statutory functions that the center director must perform.)

The center director, who was appointed in June 1995, has met with the VA's Under Secretaries and program directors, as well as veteran service organizations and minority veteran groups, to determine what factors impede or prevent utilization of services, benefits, and programs by minorities. In addition, the center is in the process of selecting coordinators in all VA facilities to help identify concerns and problems that minority veterans may experience. The center director is currently developing a strategic plan to help ensure that the goals and objectives of the center are achieved. The plan is expected to focus on improving communications with minority veterans, veteran service organizations, and other agencies in an effort to collect and assess information and issues relative to minority veterans. It is also to evaluate minority veterans' utilization of veterans programs, services, and benefits and document initiatives, areas of concerns, and proposed solutions.

Other Agencywide Initiatives and Activities

At the headquarters level, VA coordinates two publications and cultural awareness training. The Secretary is required by law to distribute benefits and services information in a

veteran's principal language, to the maximum feasible extent (38 U.S.C. 7722(a)). To comply with this requirement, in August 1984, VA published a bilingual benefits summary pamphlet entitled "Sus Beneficios," or "Your Benefits." In 1995, VA updated and replaced this pamphlet with "Un Resumen de Beneficios del VA," or "A Summary of VA Benefits." In addition, VA has an introduction written in Spanish in its publication entitled Federal Benefits for Veterans and Dependents. This annual publication describes all VA medical and nonmedical benefit programs, eligibility criteria, VA facility locations, and relevant telephone numbers.

The Secretary also requires that all VA staff attend a 4-hour diversity training course. This course focuses on assisting VA employees in (1) recognizing how their values, attitudes, behaviors, biases, and stereotypes affect others; (2) making changes in attitudes and behaviors that are not conducive to working effectively with each other; and (3) developing solutions to some diversity problems in the organization. The diversity training course is to help VA employees provide better service to all veterans, including Hispanic veterans. All staff must complete this training by the end of December 1996.

Local Office Initiatives

According to VA headquarters officials, local offices have implemented some initiatives that would address Hispanic veterans' concerns. These initiatives include issuing bilingual publications, providing interpreter service, offering cultural awareness training, and ensuring coordination with other federal agencies to provide additional services to veterans.

Bilingual Publications

According to VA program officials, almost all the local facilities in areas with large populations of Hispanic veterans--such as San Antonio, Texas; Palo Alto, California; Miami, Florida; and San Juan, Puerto Rico²--probably provide additional materials in Spanish. However, VA program officials stated that generally VA application forms are written in English. One exception is the Readjustment Counseling Service (RCS), which operates Vet Centers. RCS

²Puerto Rico translates most of its forms and other written materials into Spanish.

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translates some of its forms into Spanish for distribution to areas with substantial Hispanic populations.

Examples of printed materials in Spanish include VA home loan notices, Mental Health and Behavioral Sciences Services' psychological testing instruments, NCS services' summaries, cemetery service information, RCS' brochures and signs, and Geriatrics and Extended Care Programs' training manual written for veterans' family members who serve as caregivers. (See enc. 3 for a list of bilingual materials and initiatives.)

Interpreter Assistance

Local-level offices have the responsibility for determining the need for bilingual staff and interpreter services. Several VA officials stated that headquarters staff have no control over or knowledge of the degree to which bilingual staff are available at local offices. However, some regional offices and medical centers maintain lists of bilingual employees and volunteers. These individuals are called upon if interpreter services are needed. In addition, program officials stated that since VA tends to hire from the population in the geographic area of its facilities, the staff are likely to be reflective of veterans living in the area.

Cultural Awareness Training and Hispanic Representation

Generally, VA's 4-hour mandated diversity training course and voluntary attendance at Hispanic Heritage Month programs are all the cultural awareness training that headquarters or field staff receive. VA staff that received additional training are employed in RCS' Vet Center, Mental Health and Behavioral Sciences Service, and Social Work Service programs. The Vet Center provides "special population training" for its staff. This training includes presentations by external and internal experts and book and article discussions on a variety of cultural and racial topics. According to officials in the Mental Health and Behavioral Sciences Service and Social Work Service, professionals in these areas tend to receive more cultural awareness training as part of their professional development.

In addition to training, the RCS and Mental Health and Behavioral Sciences Service directors stated that it is important to have VA staff that reflect the surrounding

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population to assure some knowledge of and sensitivity to cultural needs. The majority of program officials stated that because they have no direct line authority over staffing in the field offices, they do not know if Hispanic workers are employed in positions that have direct contact with veterans.

Both the RCS and Mental Health and Behavioral Sciences Service directors stated that their counseling teams are generally comprised of at least one person of the same ethnic group that the patient can relate to, whether it be the therapist, social worker, or nurse. RCS is a centralized organization, with line authority at the headquarters level. Twelve years ago, the RCS director decided to adopt a central hiring policy and to have the Vet Centers' staff reflective of the population they serve. Currently, 9.2 percent of the RCS staff nationwide is of Hispanic origin, compared with 3.4 percent of the veteran population nationwide. Over 8 percent of these Hispanic employees hold positions as either team leaders, counselors, or office managers, according to the director.

VA Assistance in Obtaining
Non-VA Services

The Secretary is authorized under the veterans outreach services program to distribute information on other government programs that he determines would be beneficial to veterans.³ Accordingly, VA networks with other federal agencies and local organizations to obtain knowledge of other agency programs that can assist veterans. Thus, if a veteran needs services that VA cannot provide (for example, employment services, business loans, or eye-glasses), VA local field office staff are generally expected to refer the veteran to other federal agencies or local organizations to obtain these services. For instance, local staff are to refer veterans to the Department of Health and Human Services to obtain assistance with Indian Health Services, SSA to obtain assistance with Social Security or SSI benefits, or the Small Business Administration to obtain assistance in small business development and securing business loans. However, according to the RCS and Social Work Services directors, their staff do more than just refer veterans; they will also transport the veterans to where they need to go or follow up to ensure that they obtained assistance.

³38 U.S.C. 7722(c).

COMPARISON OF OTHER FEDERAL
AGENCIES' INITIATIVES

IRS, SSA, DOL's VETS, and PHS' OMH have similar agencywide initiatives under way that address language and cultural concerns of the Hispanic community. Agencywide initiatives typically include publication of bilingual material (notices and informational brochures), provision of interpreter services, and supplying of cultural awareness training. (See enc. 3 for the initiatives that the other four federal agency programs have in place.)

Bilingual Publications

Three of the four agencies and programs we contacted--IRS, PHS, and SSA--published some type of publications in Spanish. For example, IRS published the 1040A and 1040EZ forms for a year to see how useful the Spanish version form would be to taxpayers. They have also published brochures, tax information, and a limited number of notices in Spanish. PHS publishes various educational videotape and written materials in Spanish. SSA publishes various notices in Spanish. SSA has the ability to put a language indicator on beneficiary records. This indicator denotes whether the beneficiary would prefer to receive his or her notices in English or Spanish. Once the applicant's preference is entered into the system, the individual automatically receives future notices in the language selected. Ten percent of SSA's customer workload is in Spanish. However, the DOL/VETS program, according to an official, relies on a diverse workforce rather than on bilingual materials. More than 10 percent of its employees are Hispanic and bilingual.

Interpreter Assistance

Similar to VA, headquarters officials in three of the four agencies we visited were not very knowledgeable of the degree to which interpreter assistance is available in their field offices. However, they generally believed that local offices would make arrangements to obtain interpreter assistance where needed. For example, at IRS, incoming calls requiring assistance in Spanish can be transferred to a bilingual employee at certain locations. According to a DOL/VETS official, its staff is hired from the community it serves. Therefore, if a particular location serves a Spanish-speaking population, it will likely have bilingual staff available to provide translation assistance.

PHS' OMH promotes bilingual/bicultural language competence in its health professionals through grants with community-based minority organizations and health professional schools. PHS targets minority populations to address specific health concerns. PHS officials believe that such programs have staff available to communicate in the primary language of the people they will serve. SSA also provides translation assistance through bilingual workers and translation services. Its Commissioner requested a study, in February 1995, of the services SSA provided to its non-English-speaking public.

Cultural Awareness Training
and Hispanic Representation

The degree to which cultural awareness training was provided in the agencies contacted varied. According to some agency officials, the degree to which Hispanic staff are employed is not generally known at the headquarters level. However, SSA estimates that in areas where sizable populations speak a language other than English, about 50 percent of its employees that have direct contact with customers are bilingual. At IRS in fiscal year 1990, employees were required to attend its diversity training course, which included issues on cultural differences. DOL/VETS incorporates cultural sensitivity into its required core training modules as opposed to having a separate course on cultural awareness. Within PHS' OMH, one priority area is on achieving cultural competence. The approach is to train health care providers to be competent in providing culturally and linguistically appropriate health care to diverse populations. Some of this is accomplished through grants awarded to community-based organizations and various health professional schools. SSA provides training to all of its employees in cultural diversity and sensitivity.

DATA COLLECTED TO EVALUATE
DELIVERY OF SERVICES

VA does not consistently and routinely collect data that would allow it to evaluate its delivery of benefits and services to Hispanic veterans. The majority of VA programs do not collect race or ethnic information at either the point of application for benefits or as part of customer satisfaction evaluations. Thus, it would be difficult for VA to assess minority utilization of VA benefits and services, the success of outreach efforts, or other initiatives regarding Hispanic veterans without a special collection of these data.

According to a VA Assistant Secretary, because race is not a consideration for the granting of benefits and services, VA has not pursued collection of these data on applications or other forms. However, eight program officials who currently do not collect these data stated that their office could benefit from this information. For example, a division chief responsible for conducting national surveys and health care analysis and research, stated that having program usage data by race and ethnicity would allow her staff to identify patterns or differences in utilization rates of various VA services and benefits. In addition, her staff could compare veterans who use VA programs to those who do not.

Four VA programs collect race and ethnic data as part of their application process--VHA's medical centers (inpatient care service), Mental Health and Behavioral Sciences Service program, RCS, and VBA's Loan Guaranty Service. These programs collect these data to assess the extent to which minority veterans use their service to target treatment, improve outreach planning, and question differences and trends.

For example, the director of a program that provides counseling services to veterans stated that his program decided to collect race and ethnic information because of the National Vietnam Veteran Readjustment study findings. The study showed that certain veteran groups were at higher risk for some disorders, like Post Traumatic Stress Disorder (PTSD). According to the director, Hispanic veterans are twice as likely to have PTSD than any other minority group. Thus, to target treatment and to improve outreach planning, this program office decided to track race and ethnic information. Information assembled under this data collection effort also provided the office with utilization rates for different veteran groups. For instance, as of June 1995, the counseling center received 57,424 visits from veterans during fiscal year 1995; 4,384 of these visits, 7.4 percent, were made by Hispanic veterans.

Currently, VA's Center for Minority Veterans is developing a strategy to collect statistical data on each minority group. The center is mandated to conduct and sponsor appropriate social and demographic research on the needs of minority veterans and determine how well existing programs are meeting those needs. To address this mandate, the center plans to evaluate minority veterans' utilization of veteran programs, services, and benefits. It will also establish a steering committee to explore and propose policy and program changes that are expected to meet the specific and unique

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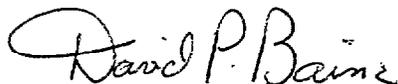
needs of minority group veterans. The committee will be comprised of VA officials as well as representatives from other federal agencies, such as the Bureau of Indian Affairs, PHS' OMH, and DOL. Furthermore, the center intends to coordinate with VA's Assistant Secretary for Policy and Planning to ensure the collection of statistical data in areas of concern to the center.

AGENCY COMMENTS

VA officials reviewed a draft of this letter and generally agreed with its content. We have incorporated their technical comments where appropriate.

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This correspondence was prepared under the direction of Associate Director Carlotta Joyner. Other contributors include Irene Chu, Assistant Director; Jaqueline Hill; and Shelia Drake. If you have questions or would like to discuss this material further, I can be reached at (202) 512-7101.



David P. Baine
Director, Health Care Delivery
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VA OFFICES CONTACTED

AGENCYWIDE OFFICES

Office of Equal Opportunity
Center for Minority Veterans
National Center for Veteran Analysis and Statistics

VETERANS HEALTH ADMINISTRATION

Ambulatory Care
 Optometry Service
 Podiatry Service
Dentistry
Public Health and Environmental Hazards
Geriatrics and Extended Care
Hospital-Based Services
 Medical Service
 Mental Health and Behavioral Sciences Service
 Pharmacy Service
 Social Work Service
Medical Administration Service
Nursing Programs
Office of Planning and Evaluation
Quality Management Systems Office
Readjustment Counseling Service
Rehabilitation and Prosthetics
Voluntary Service Office

VETERANS BENEFITS ADMINISTRATION

Compensation and Pension Service
Education Service
Insurance Service
Loan Guaranty Service
Veterans Assistance Service
Vocational Rehabilitation and Counseling Service

NATIONAL CEMETERY SYSTEM

Budget and Planning Service

RESPONSIBILITIES OF THE
DIRECTOR OF THE
CENTER FOR MINORITY VETERANS

The Veterans Benefits Improvement Act of 1994 requires the Director of the Center for Minority Veterans to perform the following 10 functions with respect to veterans who are minorities:

1. Serve as principal adviser to the Secretary on the adoption and implementation of policies and programs affecting veterans who are minorities.
2. Make recommendations to the Secretary, the Under Secretary for Health, the Under Secretary for Benefits, and other Department officials for the establishment or improvement of programs in the Department for which veterans who are minorities are eligible.
3. Promote the use of benefits by veterans who are minorities and conduct outreach activities to veterans who are minorities.
4. Disseminate information and serve as a resource center for the exchange of information regarding innovative and successful programs that improve the services available to veterans who are minorities.
5. Conduct and sponsor appropriate social and demographic research on the needs of veterans who are minorities and the extent to which programs authorized under this title meet the needs of those veterans, without regard to any law concerning the collection of information from the public.
6. Analyze and evaluate complaints made by or on behalf of veterans who are minorities about the adequacy and timeliness of services provided by the Department and advise the appropriate official of the Department of the results of such analysis or evaluation.
7. Consult with and provide assistance and information to officials responsible for administering federal, state, local, and private programs that assist veterans to encourage those officials to adopt policies that promote the use of those programs by veterans who are minorities.
8. Advise the Secretary when laws or policies have the effect of discouraging the use of benefits by veterans who are minorities.

9. Publicize the results of medical research that are of particular significance to veterans who are minorities.
10. Perform such other duties as the Secretary shall prescribe.

BILINGUAL MATERIALS AND
INITIATIVES AT FOUR
FEDERAL AGENCIES

<u>Agency/organization</u>	<u>Examples of initiatives</u>
Department of Veterans Affairs	
Veterans Benefits Administration	
Compensation & Pension Service	Bilingual workers; may provide some communicate in Spanish; cultural awareness training
Education Service	May have some bilingual VBA counselors; cultural awareness training
Loan Guaranty Service	Loan default notices, posters; cultural awareness training
Veterans Assistance Service	Summary of benefits pamphlet; cultural awareness training
Vocational Rehabilitation and Counseling Service	Application/forms (especially in Puerto Rico); cultural awareness training
Insurance Service	Has bilingual staff; cultural awareness training
Veterans Health Administration	
Optometry	Can get translation services if needed; cultural awareness training
Dentistry	List of available interpreters; cultural awareness training; may have bilingual brochures
Pharmacy	Bilingual patient instructions; cultural awareness training
Geriatrics and Extended Care	Locally prepared caregiver manual; cultural awareness training
Readjustment Counseling Service	Brochures, forms, signs; cultural awareness training
Public Health and Environmental Hazards	Uses some PHS bilingual materials; cultural awareness training
Rehabilitation and Prosthetics	Cultural awareness training
Nursing programs	May have brochures, posters, patient instruction literature; cultural awareness training
Voluntary Service	Volunteers provide translation assistance
Medical Administration Services	No bilingual material provided from central office; medical centers may provide something; cultural awareness training
Podiatry	Cultural awareness training
Mental Health and Behavioral Sciences	Psychological testing instrument; cultural awareness training; materials vary by location
Social Work Service	Some hospitals may have forms in Spanish; cultural awareness training
Medical Services	Cultural awareness training
National Cemetery System	Article in Spanish; fact sheet; cultural awareness training
Department of Labor	
Veterans Employment Training Service	Over 10 percent of employees are bilingual; cultural awareness training
Internal Revenue Service	
	1040A and 1040EZ forms, (1-year pilot) brochures/pamphlets; phone access to bilingual staff, cultural awareness training in 1990
Department of Health and Human Services	
Public Health Service	
Office of Minority Health	Health educational materials, resources, and videos; bicultural and bilingual health professionals; community health coalition capacity building program
Social Security Administration	
	SSA notices; bilingual staff; cultural awareness training

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